

## Default Question Block

### **FSU College of Nursing BSN Application Fall 2023**

Directions: Please read the following eligibility requirements, initial, and click continue to begin the FSU College of Nursing BSN Fall 2023 application.

To be eligible to apply, applicants must have:

- completed all liberal studies/general education requirements and a minimum of sixty (60) semester hours of courses that fulfill general education requirements per the FSU catalog OR hold an Associate of Arts (AA) degree. The BSN program is an upper-division major which requires a minimum of 60 hours to be completed prior to admission into the program.
- earned at minimum 3.0 overall college GPA.
- earned a “C” or better in all nursing prerequisite courses.
- repeated no more than one (1) nursing prerequisite for a higher grade. Official withdrawal (W on transcript) does not count as a repeated course.
- no more than one science prerequisite in progress during the Summer 2023 semester (lab and lecture count as one prerequisite).
- completed all other science prerequisites by the end of the Spring 2023 semester.
- applied as a transfer student to FSU Undergraduate Admissions (for students not currently enrolled at FSU). The application to the university must be submitted prior to completing the application into the college of nursing. You do not need an admission decision from the

university, but you need to have applied prior to submitting your nursing application. Transfer Application Instructions can be found at <https://admissions.fsu.edu/transfer/apply/>

- have all official transcripts sent to the Office of Admissions at FSU (if applicable). For additional information, please visit the College of Nursing's webpage at <https://nursing.fsu.edu/academics/bachelor-science-nursing-bsn>

By typing my initials below, I acknowledge that I meet all requirements listed and am eligible to apply:

**College of Nursing**  
**BSN Application**

Please enter your nine-digit EMPLID or Reference number:

\*All FSU Students have an EMPLID number. This can be viewed on your my.fsu.edu portal.

If you are a transfer student, please fill this field with your university application reference number.

I am applying for:

☐ Fall 2023

I am applying as a(n):

☐ FSU Student (currently enrolled)

☐ Transfer Student

☐ Transfer Student: Second-Degree Seeking

☐ Transfer Student: Recently graduated HS with earned A.A.

☐ Other - Type In Response

Contact Information:

First Name

Middle Name

Last Name

Phone

Student E-Mail

Present mailing address

Street Address line 1

Street Address line 2

City

State

Zip Code

County

Is this your permanent address?

☐ Yes

☐ No

Permanent mailing address:

Street Address line 1

Street Address line 2

City

State

Zip Code

County

Race/Ethnicity

☐ American Indian or Alaska Native

- ☐ Asian
- ☐ Black or African American
- ☐ Hispanic or Latino
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ White
- ☐ Two or more
- ☐ Other

Sex

- ☐ Female
- ☐ Male

Gender Identity

- ☐ Female
- ☐ Male
- ☐ Trans Female
- ☐ Trans Male
- ☐ Nonbinary
- ☐ Other

Educational Institution

- ☐ FSU (enter beginning term and year, example: Fall 2020)
- ☐ Other (enter institution name, beginning term, and year):

Dates of Attendance:

Graduation Date (if applicable):

Have you already had official transcripts sent from the college or university you attended?

☐ Yes

☐ No

Upload unofficial transcripts here:

Please note: this does not replace the **requirement** to have official transcripts sent to the university in a timely manner. Failure to send official transcripts could result in "incomplete" application status, which will not be considered by the admissions committee.

Do you have a High School AA Degree?

☐ Yes (enter graduation date):

☐ No

Please enter your High School information:

High School

City

State

Zip

Additional education institution:

☐ FSU

☐ Other (enter name of institution and dates of attendance)

☐ None

How many dual enrollment credits do you have?

How many accelerated credits (AP, IB, and/or AICE) do you have?

Please indicate below if you have completed all of the FSU BSN Program prerequisites:

- CHM 1045 General Chemistry I for Science Majors
- BSC 2010 General Biology for Science Majors
- HUN 1201 Science of Nutrition
- BSC 2085 & Lab Anatomy & Physiology I and Lab
- BSC 2086 & Lab Anatomy & Physiology II and Lab
- MCB 2004 & Lab General Microbiology and Lab
- STA 2XXX Statistics (Fundamental or Applied)
- FAD3220 Individual & Life Span Development (DEP2004 @ other institutions)
- PSY 2012 or General Psychology
- Any Sociology

(If you are currently enrolled, or plan to enroll, in the Summer 2023 semester to complete prerequisites, please indicate with In Progress.)

- ☐ Yes, I have completed all of the required prerequisites with a C or better
- ☐ Yes, I have completed some prerequisites and have registered or am planning to complete the remaining ones by Summer 2023. (List courses you are registered for or are planning to complete below).
- ☐ No, I have not completed the required prerequisites with a C or better.

I understand that any admission decision I receive is contingent upon successful completion of any in progress or incomplete prerequisites. (Please note: only one science prerequisite in progress the semester prior to the term I plan on entering the program).

I acknowledge that unofficial transcripts uploaded within this application does not meet the mandatory requirement of having official transcripts sent to the university.

- ☐ Yes, I acknowledge both statements above.

Please list the prerequisites you are currently enrolled in for Spring 2023:

Please list the prerequisites you are planning on taking Summer 2023:

Please complete the FSU Nursing S/U Letter Grade Form on the FSU College of Nursing website for each prerequisite class you received an S/U grade.

Have you had to repeat any of the required nursing prerequisites due to receiving a grade of C- or lower?

☐ Yes (list repeated courses):

☐ No

Are you affiliated with any of the following:

☐ Veteran

☐ CARE

☐ ROTC

☐ Athletics (list sport):

☐ Pell

☐ Quest

Please attach a copy of your Personal Statement Essay. The following is **required** to process your application.

Limit your essay to no more than 500 words **total** for the entire essay including both questions

Please do **not** put your name on your essay

Answer **BOTH** questions:

- It must be in PDF format.
- Type your EMPLID/Reference number on your essay's heading, and **do not include your name**.

- Before uploading and submitting, name your PDF as your EMPLID/Reference number, followed by 'Essay'. Example: 555010555Essay.pdf

1. Florida State University seeks a talented, engaged student body that embodies a wide range of human experiences. We believe the diversity of our students makes our community stronger. Please share your perspective on how diversity can impact the field of nursing and how nursing care is provided.

2. With all of the opportunities available in the healthcare field, what makes nursing the right choice for you?

Video- Recorded Interviews are **required** to process your application.

Submission Instructions:

Record your response by creating a YouTube video to the prompt below on either a computer or smartphone, with both video and audio enabled.

Answer both questions of the prompt fully and to the best of your ability. Submissions should not exceed 7 minutes.

Please start your recording by introducing yourself by stating your full first and last name. Save video/youtube file as “Last name, First name” and “student ID or emplID. Example: Doe, John 123456789

Please make sure to save/publish your video as unlisted. Once you have completed your YouTube video please upload your submission below:

Video Interview Questions: Answer both questions

1. Tell me about a time when you handled a challenging situation.



2. Florida State University seeks a highly diverse group of students to prepare for the nursing profession. Tell us about a time when you the opportunity to collaborate with others who were different from you?

Paste video submission link here:

**Are you currently, or have you ever been, charged with or subject to disciplinary action for scholastic or any other type of behavioral misconduct at any educational institution?** You do not need to disclose academic dismissal, suspension, or probation for poor grades. You are required to furnish the College of Nursing with a written explanation of the event(s) if there was academic misconduct (such as plagiarism or cheating) or behavioral misconduct, and tell us what you have learned from your past action(s).

☐ Yes

☐ No

Please upload your explanation of any academic misconduct event(s), in PDF format.

**Have you ever been charged with a violation of the law which resulted in, or if still pending could result in, probation, community service, a jail sentence, or the revocation or suspension of your driver's license (including traffic violations which resulted in a fine of \$200 or more)?** You are required to furnish the College of Nursing with a list of all violations, and must include a statement telling us what you have learned from your past action(s).

☐ Yes

☐ No

**Have you ever been charged with a felony (even if adjudication was withheld)?** You are also required to furnish a statement telling us what you have learned from your past action(s). If admitted, a criminal background check will be completed.

☐ Yes

☐ No

Please upload a written explanation of your violations and/or charges and what you learned (PDF format).

## Block 1

### College of Nursing Community Engagement Application

Have you obtained a CNA, Medical Assistant, EMT or any other credentialed healthcare certification?

- ☐ Yes, CNA
- ☐ Yes, Medical Assistant
- ☐ Yes, EMT
- ☐ Yes, other
- ☐ No

What year did you obtain your certification?

Are you currently working as a CNA/Paramedic/Medical Assistant/EMT or other credentialed health care professional?

- ☐ Yes
- ☐ No

How many hours are you working a month in your certified role?

Have you worked as CNA/Paramedic/EMT or credentialed healthcare professional in the past?

☐ Yes

☐ No

Include years or months of employment:

Do you have a BLS and/or CPR certification?

☐ Yes, BLS I am certified.

☐ Yes, I am CPR certified/

☐ Yes, I am both BLS and CPR certified.

☐ No.

List specific certification and year.

List any other certifications you hold:

Do you have any relative experience volunteering or shadowing a healthcare professional or in a healthcare setting?

☐ Yes

☐ No

Have you volunteered or shadowed exclusively with an RN or APRN?

☐ Yes

☐ No

How many hours have you volunteered or shadowed exclusively with an RN or APRN?

- ☐ > than 40 hours in the past 24 months
- ☐ 21 to 39 hours in the past 24 months
- ☐ 1 to 20 hours in the past 24 months

Where did you complete your volunteer or shadowing hours?

Have you volunteered or shadowed any other medical professional in the last 24 months?

- ☐ Yes
- ☐ No

How many hours have you volunteered or shadowed with any other medical professional in the last 24 months?

- ☐ > than 40 hours in past 24 months
- ☐ 21 to 39 hours in the past 24 months
- ☐ 1 to 20 hours in the past 24 months

Where did you complete you volunteer or shadowing hours?

Have you volunteered at a hospital volunteer in the past 24 months?

- ☐ Yes
- ☐ No

How frequently have you volunteered at the hospital in the past 24 months?

- ☐  $\geq$  once per month

☐ < once per month

What hospital did you complete your volunteer hours at?

Have you participated in the Undergraduate Research Opportunity Program (UROP)?

☐ Yes

☐ No

List name of internship, role and dates of participation:

I have participated in the UROP as an:

☐ UROP Nursing Research or Research Assistant in College of Nursing

☐ UROP non-nursing research or research assistant in another discipline

List role and major professor:

Have you had a healthcare related internship, paid or unpaid, over the past 24 months?

☐ Yes

☐ No

List name of internship, role, and timeframe:

Have you held a committee position in a service organization?

☐ Yes

☐ No

Please list the organization and position:

Have you served in a service organization that required a monthly commitment?

☐ Yes

☐ No

Please list the organization and position:

Do you have experience working with vulnerable populations (groups and/or communities at a higher risk for poor health as a result of the barriers they experience to social, economic, political and environmental resources, as well as limitations due to illness or disability)?

☐ Yes

☐ No

How much experience do you have working with this population?

☐ 1-3 months

☐ 4-6 months

☐ > 6 months

Please list organization(s) and total hours worked:

Have you volunteered at any type of non-profit, daycare or elder care over the last 24 months?

☐ Yes

☐ No

Please describe your role:

Have you participated in any annual service events, that required a 1-day commitment?

☐ Yes

☐ No

How many service events have you participated in?

☐ 1

☐ 2

☐ 3

☐ 4 or more

Please describe the service you provided for the event(s):

Have you been a mentor in FSU's Mentor/Mentee Program?

☐ Yes

☐ No

Have you participated in any healthcare related missions' trips in the past 48 months?

☐ Yes

☐ No

How many mission trips have you participated in?

- ☐ 1
- ☐ 2 or more

Please list trip(s), location(s), and timeframe(s):

Have you been a camp counselor (minimum of two weeks) over the past 48 months?

- ☐ Yes
- ☐ No

Was this camp working with vulnerable populations?

- ☐ Yes
- ☐ No

Please list camp, role and timeframe:

Have you held a healthcare related job in the past 12 months?

- ☐ Yes
- ☐ No

How many hours a week did you work in this job?

- ☐ ≤ 20 hours per week
- ☐ >20 hours per week



Have you held a non-healthcare related job in the past 12 months?

- ☐ Yes
- ☐ No

How many hours per week did you work in this job?

- ☐ ≤ 20 hours per week
- ☐ > 20 hours per week

## Block 2

What resources did you use to prepare for this process? i.e. academic advising, career center, mock interviews, reading and writing center.

Have you applied to the College of Nursing at Florida State University before?

- ☐ Yes
- ☐ No

May we contact you via e-mail? This will be the only way we will be communicating with students. We will use the email address you entered on this application.

- ☐ Yes
- ☐ No

By signing, I acknowledge that I have reviewed and understand the policies and guidelines with the documents provided by FSU College of Nursing. I understand it is my responsibility to comply with and implement all policies and procedures within this document.

**SIGN HERE**

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